

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	C.H.		
O.I.P.E. CLASSIFIER		43	5/7/01
FORMALITY REVIEW	AM	917	06-07-01
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE CO

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	7-14-01
2	
3	0
4	✓
5	✓
6	✓
7	✓
8	✓
9	0
10	0
11	0
12	0
13	0
14	✓
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16	✓
17	✓
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23	✓
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27	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here